

PRESTON  
RURAL DISTRICT COUNCIL.

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ANNUAL REPORT

OF THE  
MEDICAL OFFICER OF HEALTH,  
1913.

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TO THE CHAIRMAN AND MEMBERS OF THE  
PRESTON RURAL DISTRICT COUNCIL.

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Mr. Chairman and Gentlemen,

I have now the pleasure of offering for your acceptance my annual statement as your Medical Officer of Health for the year 1913. Its scope is very similar to other years, and as a record I consider it conveys a message of some progress towards raising the tone of Sanitation in this Rural area. I here give some points of interest embodied in the report and concerning these I will have more to say further on—

- (a) Death rate, 12·68—lowest ever recorded—or a decrease of 0·43 on 1912.
- (b) Birth rate, 20·30.
- (c) Infantile Mortality rate, 110·00.
- (d) Zymotic death rate, 0·85,
- (e) Epidemic Disease (Prevalence and Distribution.)
- (f) Scheme to Sewer Longton and Little Hoole.
- (g) Probable completion of the Penwortham Sewerage Scheme.
- (h) Increased use of water supplies.

**Preston Rural District.**

This district is seventeen miles in length measured in the direction North-East to South-West, and is about eleven and a half miles in width.

For the purpose of this report it may be divided into the following sections, four in number :—

- (a) Penwortham, Howick, Hutton, Farington, Longton, Little Hoole and Much Hoole, towards the South-West.

(b) Goosnargh, Whittingham, Barton, Woodplumpton, Houghton, Broughton, Lea with Ashton, Ingol and Cottam, towards the North and West.

(c) Grimsargh and Brockholes, Elston and Ribbleson, Samlesbury and Cuerdale, Central and East.

(d) Ribchester, Dutton and Hothersall, towards the North East.

The whole district has a general slope downwards from the flank of the Fells about its North-East border towards the South-West, where the level approximates very closely to that of the sea. The surface undulates and is diversified by numerous deep valleys through which streams run, the undulations increase in frequency and importance in the sections "c" and "d."

The surface of the district consists almost entirely of glacial deposits resting on the rock surface beneath. The glacial deposits are the upper and lower boulder clays with drift sands between them, but occasionally the sand and gravel beds are exposed at the surface.

Beneath the glacial deposits of sections "a" and "b" occurs the Red Sandstone of the Pebble Beds (Triassic) but the rock is nowhere exposed, not even in the beds of the rivers. In the Goosnargh and Whittingham portions of section "b" the rocks are Carboniferous Limestones, Grits and Shales, which are exposed in the high grounds forming the flanks of the Fells. The rocks under section "d" are Millstone Grit and Shales. In the river valleys are extensive beds of Alluvium, and the extreme western portion of the district "a" consists of reclaimed marsh with wide stretches of sand in the estuary of the Ribble. Formerly extensive and thick beds of peat rested on the boulder clays in the lower lying parts of sections "a" and "c," but most of the peat has now been removed and the soil brought under cultivation; tree stumps, erect but buried by the peat—the remains of forests which have long since disappeared—have been found in great numbers.

I am indebted to Mr. G. T. Gibbs, F.R.A.S., M.I.Mech. E., for this geological report.



## Some Remarks bearing on Epidemic Invasions in 1913.

Speaking generally, epidemic invasions appear to have met the average incidence, and although I shall comment on each disease separately I may just remark on the ever present evidence of Scarlet Fever. This disorder was with us practically all the year round, no month escaping. In the beginning and Autumn of 1913 Measles in an epidemic form caused some anxiety. Mumps also broke out. All these irruptions were in the townships north of the Ribble, and so placed as to justify the view that intercommunication between the children or those associated with them prolonged the existence of the outbreaks. One or two slight manifestations of Chicken Pox occurred. Diphtheria showed no activity and the type of the disease was milder. The fight between epidemic disease and the health officers of Sanitary Authorities demands many qualities from officials, amongst these I may name tact, determination, and perseverance. If the contest lay between the official and disease the victory would be with the official, but it is those people who are mixed up with epidemic outbreaks, I do not mean the actual sufferers, I refer to those people in charge of children, who at times are apparently actuated by a desire to be careless and thoughtless. No Medical Officer of Health can control an outburst of infectious disease without the hearty co-operation of all those in charge of and associated with children of school age and upwards. One finds at the very time a storm of public opinion is raging against the prevalence of an infectious outbreak, the very people who are proclaiming themselves in the loudest way will on their own family becoming infected commit some of the most egregious errors of judgment, and through this carelessness or ignorance help to pass the prevailing disease on to their friends or next door neighbour; on remonstrating with such as these the inevitable answer is, "I never thought I was doing any harm." I say with much force that it is the bounden duty of these people to take care they do think, and afterwards apply the rational outcome of their thoughts. It is no use saying "I'm sorry" when, through thoughtlessness, infection has been carried into a relative's or friend's family, and death results. Yet this has been done. I say through this report to the fathers and mothers of families and all others in the charge of children that, seeing that much is done at very considerable expense by the Local Authority to help in staying and stamping out epidemic invasions. Isolation Hospitals, with well organised ambulance arrangements, supply of disinfectants and the disinfection of premises,

and printed literature explaining the cause and means of dealing with and defeating infectious diseases, are all supplied free of cost. I often wonder if these instructions are read, because I do know on many occasions they are not acted on. Are the disinfectants applied so as to obtain the best results? Perhaps they are, perhaps they are not. Hospital accommodation is more freely accepted than formerly, and people are realizing that cases ~~heated~~ in hospital have a better chance of recovery and are less liable to the secondary affections of epidemic ailments than if dealt with and nursed at home. I make a strong appeal to all those concerned to make themselves acquainted with the details of how to act in the presence of catching diseases, whether within their own houses or without, so that they can apply this knowledge to their own interests, the interests of the locality they reside in, and the State.

I have a few words to say as to the bearing of school attendance on this dissemination of infectious outbreaks. My experience all points to the School as a very important factor in spreading disease. It requires the greatest caution and perspicuity on the part of teachers to detect early instances of infectious ailment. If this can be done then many epidemics can be aborted. A failure to detect early cases ends in quick extension of the disorder, with the acme of disorganization and extensive loss, both educationally and otherwise. I desire to pay a well merited tribute to the Head Teachers and others I have from time to time come in contact with. These ladies and gentlemen are zealous, painstaking, and observant in the interests of the health of the children under their charge, and they have given me every assistance in their power. I wonder if teachers would try and instil into the heads of their young flocks that in these days of motor traffic the centre of the road is not a place of safety. Yet it is in this position whole schools proceed to their homes, and I have seen some narrow escapes. I again raise my voice against the old-fashioned slate. This means of communicating throat ailments and other diseases should have "short shrift," and be thrown out of every school.

### Scarlet Fever.

Scarlet Fever never assumed a sufficiently epidemic form as to call for school closure, at the same time the persistent way it continued to live and spread all through the year was on more than one occasion sufficient to cause anxiety. Each

month brought its quota of cases. The township of Penwortham appeared to suffer most. Although throughout the year the disease was epidemic in the North Ribble portion of the area there is no doubt the townships south of the Ribble suffered most. From time to time outbursts of this disorder occurred. In April and May there were quite a considerable number of infected children in Penwortham; and, again, the months of October and November yielded a rather prolific crop, and the disease continued to the end of the year. There was rather an active outbreak at Whittingham in September. The cause of this was quite clear. A child who had suffered from Scarlet Fever, and recently discharged from an Isolation Hospital, after treatment came to this neighbourhood, and very soon three or four families became involved. However, strong precautionary measures, coupled with prompt removal to the Infectious Hospital, soon quieted matters down. Other townships suffered, but only to a minor extent.

I had one rather interesting experience. In the month of May, during one of the exacerbations of Scarlet Fever at Penwortham, I noticed that cases of this disease accompanied the distribution of milk from a certain farm. I very carefully examined the family at the farm, and those associated with the milk therefrom, with no definite result. So far as I could make out, some 12 families became infected out of 14 who had a milk supply from this source. I asked the County Medical Officer of Health to go into the matter with me, and he kindly did so. After a close examination of all concerned, he was obliged to acknowledge that he could trace no connection between the milk and the infection of the families in question. It is not of frequent occurrence that a milk supply acts as a carrier of Scarlet Fever, and I quote this instance to show how suspicious this circumstance was, as I firmly believe, although not cleared up, there was undoubtedly strong circumstantial evidence connecting the milk supply with these infected families. I may also state that all the cows were healthy. Outside what I have said, the other disseminations of Scarlet Fever gave no anxiety, and soon subsided. In all 94 cases were notified; 82 of these were treated in the Infectious Hospital.

### **Measles.**

Measles exhibited an epidemic tendency early in this year. On the 5th of January I became aware that measles had broken out amongst the children attending Broughton School. The Council, acting on my advice, closed this school



from the 7th to the 21st of January. A continuance of the closure was rendered necessary by the persistence of the epidemic, and on a certificate signed by two members of the Council the school remained closed until the 4th of February.

Samlesbury C.E. School was closed by order of the Council from the 8th to the 21st of January. It will be remembered that Goosnargh School was closed during December, 1912. School attendance should have been resumed on the 7th of January. As there were a considerable number of fresh cases of Measles occurring, the Council, on my recommendation, extended the period of closure to the 21st of January.

About the 20th of January a considerable number of the children in Standard I. at Fernyhalgh R.C. School developed Measles. So quickly did the disease spread that for the whole school closure was adopted on the 26th January until the 13th of February. The outbreak not having subsided, the school remained closed until the 24th of February. On the 10th of February I had notice from the School Attendance Officer that some 15 cases of Measles had developed amongst the children attending Grimsargh School. I visited the school and endeavoured, by means of the exclusion of children from infected families, and, of course, those actually suffering from the disease, to stay this outburst. All this proved ineffectual. The school was closed from the 18th of February to the 11th of March. Again, on the 24th of February the School Attendance Officer communicated to me that The Hill R.C. School, Goosnargh, had been invaded by Measles. I advised closure, and two members of the Council authorised the discontinuance of school attendance from the 25th February to the 18th of March.

I believe that by the detecting and excluding of the first case of Measles, Whitechapel School, Goosnargh, was saved from an epidemic.

At the meeting of the Council held on the 16th of September it was ordered that the Infants' Class, Woodplumpton School, be closed from that date. On the 29th of September the remainder of the children attending this school were sent home, owing to the very rapid spreading of Measles, for a period of 14 days. The school re-opened on the 13th of October. It is quite evident that Measles played an active part as an epidemic disease. I feel quite impotent when trying to stamp out Measles. School closure may



relieve the public mind and quiet the tongues of those who babble at the terrible prevalence of disease, but who are careful to do nothing to stay the disorder. It is now generally accepted that, unless the first few cases of Measles are promptly detected and isolated carefully, the disease will spread, and school attendance is a feature of high potency in its dissemination.

### **Mumps.**

In September Mumps appeared amongst the children attending Lea R.C. School. So extensive was the outburst that the Council authorised the closing of the school from the 16th of September to the 6th of October.

### **Chicken Pox.**

On a few occasions Chicken Pox invaded some areas of the District. In March a considerable number of children attending Middleforth School, Penwortham, developed this disease. However by exclusion and the careful watching that children did not return until the scabs had all peeled off the outbreak died out. In September, Catforth Council School was invaded with a few cases each of Mumps, Chicken Pox, and Measles, all occurring in and about the same period.

### **Typhoid Fever.**

There were reported 6 cases of Typhoid Fever, as compared with the same number in 1912, and 11 in 1911. Five of these were recorded against the Townships south of the Ribble, and were of a thoroughly sporadic type. A tabular allocation accurately defining the Townships in which these outbreaks of Typhoid took place will be found a little further on in the report.

### **Diphtheria.**

I had no trouble in dealing with Diphtheria. Eleven cases were notified, 9 of these being healed in the Isolation Hospital. On no occasion did this disease threaten epidemic tendencies. I had in March a communication from Dr. Buchan, Medical Officer of Health, St. Helens, intimating that a child who had been in contact with a case of Diphtheria had removed from St. Helens to Ribchester. I at once communicated with the Ribchester family and the house was kept under observation; fortunately nothing happened. I quote this instance to show the public how closely epidemic disease is traced and watched nowadays.

## Whooping Cough.

Whooping Cough did not prevail to any marked degree. Some children had the disease at Longton in September, and these with a few scattered instances made up the total evidence of its prevalence.

## Small Pox.

No case of Small Pox occurred in this Rural area during the year 1913.

On the 7th of November I received a notice from the Medical Officer of Health, Port of London Sanitary Authority, that a case of Small Pox had occurred on a certain ship, and further that one of the passengers had proceeded to the township of Longton within the jurisdiction of this Council. I dealt with this matter as it required.

I have from year to year, through the medium of my annual reports, set forth my views as to the protective value of vaccination, and in no degree have I abated in my confidence in respect to this operation as a safeguard against this foul disease. The fact of the present non-prevalence of Small Pox for some years conveys no great comfort to my mind, and when I think how neglected vaccination is at the present time I quite realise the abundant field open to Epidemic Small Pox amongst our unvaccinated childhood. A fairly active spark is all that is necessary to start such a catastrophe as England has not seen for many years ; at the present time some 28 to 30 per cent of the children born are exempted from vaccination, and in addition there are 10 per cent of the births unaccounted for. It may be taken for granted that most of these children if they survive are unvaccinated, add these to the 28 per cent of exempted children, and you reach an unvaccinated percentage of probably 38. Year by year the number of children excluded from the protection of vaccination by means of the facilities now provided by law steadily increases, and no doubt this will continue to be the case until the prevalence of Epidemic Small Pox educates the public.

## Pulmonary Tuberculosis.

Under the Public Health Tuberculosis Regulations I received 26 notifications of new cases on Forms A and B, 18 "pulmonary," and 8 "other forms" of tuberculosis. In addition 1 case of pulmonary tuberculosis was notified from

the Whittingham Asylum. Five notifications were received on Form C from Sanatoria and other Public Institutions, of patients admitted from this district, and 3 notifications on Form D—discharges from Sanatoria.

The table here inserted gives an idea of the distribution of Infectious diseases (excluding Tuberculosis) as notified to me, or ascertained by the Inspector of Nuisances and myself.

No.	Date.	Locality.	Disease.	No. of Infected Houses.	No. of Cases notified or ascert'n'd
	1913				
1	Jan. 7	Broughton ..	Measles ...	9	13
2	" 7	Samlesbury ...	Measles ...	5	8
3	" 11	Lea ...	Scarlet Fever ...	1	1
4	" 13	Hutton ...	Scarlet Fever ...	1	1
5	" 14	Catforth ...	Typhoid Fever...	1	1
6	" 15	Little Hoole ...	Typhoid Fever...	1	1
7	" 15	Farington ...	Erysipelas ...	1	1
8	" 21	Penwortham ...	Scarlet Fever ..	1	3
9	" 23	Penwortham ..	Scarlet Fever ...	1	1
10	" 23	Fernyhalgh ...	Measles ...	11	16
11	Feb. 3	Farington ..	Scarlet Fever ...	1	1
12	" 10	Goosnargh ...	Measles ...	15	20
13	" 12	Farington .	Erysipelas ...	1	1
14	" 25	Goosnargh ...	Measles ...	10	16
15	Mar. 12	Farington ...	Scarlet Fever ...	1	1
16	" 20	Penwortham ...	Chicken Pox ...	9	13
17	" 24	Farington ...	Scarlet Fever ...	1	1
18	Apl. 3	Farington ...	Scarlet Fever ...	1	1
19	" 5	Penwortham ...	Diphtheria ...	1	1
20	" 8	Penwortham ...	Scarlet Fever ...	1	1
21	" 12	Penwortham ...	Scarlet Fever ...	1	1
22	" 14	Penwortham ...	Scarlet Fever ...	1	1
23	" 16	Penwortham ...	Scarlet Fever ...	1	1
24	" 19	Penwortham ...	Erysipelas ...	1	1
25	" 19	Much Hoole ...	Scarlet Fever ...	1	1
26	" 23	Penwortham ...	Scarlet Fever ...	1	1
27	" 23	Penwortham ...	Scarlet Fever ..	1	1
28	" 23	Much Hoole ...	Scarlet Fever ...	1	1
29	" 23	Broughton ..	Scarlet Fever ...	1	1
30	" 25	Penwortham ...	Scarlet Fever ..	1	1
31	" 37	Penwortham ...	Scarlet Fever ...	1	1
32	" 27	Penwortham ...	Diphtheria ...	1	1
33	May 2	Penwortham ...	Typhoid Fever...	1	1
34	" 10	Penwortham ...	Scarlet Fever ...	1	1



No.	Date.	Locality.	Disease.	No. of Infected Houses.	No. of Cases notified or ascert'n'd
1913					
35	May 10	Penwortham ..	Scarlet Fever ...	1	1
36	" 10	Penwortham ...	Scarlet Fever ...	1	1
37	" 12	Penwortham ...	Scarlet Fever ...	1	1
38	" 15	Penwortham ...	Scarlet Fever ..	1	1
39	" 17	Penwortham ..	Scarlet Fever ..	1	1
40	" 21	Penwortham ...	Scarlet Fever ...	1	2
41	" 22	Broughton ...	Scarlet Fever ...	1	1
42	" 22	Penwortham ...	Scarlet Fever ...	1	1
43	" 24	Penwortham ...	Scarlet Fever ...	1	2
44	" 25	Grimsargh ..	Scarlet Fever ...	1	1
45	" 26	Penwortham ..	Scarlet Fever ...	1	1
46	" 29	Penwortham ...	Scarlet Fever ...	1	1
47	" 30	Penwortham ..	Scarlet Fever ...	1	1
48	June 2	Haighton ...	Scarlet Fever ...	1	1
49	" 7	Penwortham ...	Scarlet Fever ..	1	1
50	" 13	Penwortham ...	Diphtheria ...	1	1
51	" 20	Penwortham ..	Scarlet Fever ...	1	1
52	July 3	Goosnargh ..	Diphtheria ...	1	1
53	" 7	Penwortham ...	Scarlet Fever ...	1	1
54	" 8	Penwortham ...	Scarlet Fever ...	1	1
55	" 11	Penwortham ...	Scarlet Fever ...	1	1
56	" 12	Samlesbury ...	Typhoid Fever...	1	1
57	" 12	Longton ..	Scarlet Fever ...	1	1
58	" 26	Penwortham ...	Scarlet Fever ...	1	1
59	" 28	Penwortham .	Scarlet Fever ...	1	1
60	" 30	Penwortham ..	Scarlet Fever ...	1	1
61	Aug. 16	Howick ...	Scarlet Fever ...	1	1
62	" 18	Penwortham ...	Scarlet Fever ...	1	1
63	" 18	Grimsargh ...	Diphtheria ...	1	1
64	Sept. 5	Whittingham...	Scarlet Fever ...	1	1
65	" 5	Whittingham ..	Scarlet Fever ...	1	1
66	" 5	Whittingham...	Scarlet Fever ...	1	1
67	" 8	Whittingham...	Scarlet Fever ...	1	1
68	" 8	Longton ..	Scarlet Fever ...	1	1
69	" 10	Whittingham ..	Scarlet Fever ...	1	1
70	" 11	Penwortham ..	Scarlet Fever ...	1	2
71	" 14	Broughton ..	Erysipelas ...	1	1
72	" 16	Woodplumpton	Measles ...	12	20
73	" 16	Lea ...	Measles ...	7	12
74	" 17	Penwortham ...	Scarlet Fever ...	1	1
75	" 20	Longton ...	Diphtheria ...	1	1
76	" 24	Howick ...	Scarlet Fever ...	1	1
77	" 25	Penwortham ..	Diphtheria ...	1	1



No.	Date.	Locality.	Disease.	No. of Infected Houses.	No. of Cases notified or ascert'n'd
1913					
78	Sept. 26	Howick ...	Scarlet Fever ...	1	1
79	" 27	New Longton	Scarlet Fever ...	1	1
80	" 29	Woodplumpton	Measles ..	14	20
81	Oct. 3	Penwortham ...	Diphtheria ...	1	1
82	" 4	Penwortham ...	Scarlet Fever ...	1	1
83	" 4	Catforth ...	Chicken Pox ...	5	9
84	" 7	Penwortham ...	Scarlet Fever ...	1	1
85	" 7	Penwortham ...	Scarlet Fever ...	1	1
86	" 10	Penwortham ...	Scarlet Fever ...	1	1
87	" 10	Penwortham ...	Scarlet Fever ...	1	1
88	" 10	Penwortham ...	Scarlet Fever ...	1	1
89	" 14	Penwortham ...	Scarlet Fever ...	1	1
90	" 17	Whittingham ..	Scarlet Fever ...	1	1
91	" 18	Penwortham ...	Scarlet Fever ...	1	1
92	" 18	Penwortham ...	Scarlet Fever ...	1	1
93	" 21	Penwortham ..	Scarlet Fever ...	1	2
94	" 28	Penwortham ...	Diphtheria ..	1	1
95	" 28	Penwortham ..	Scarlet Fever ...	1	1
96	" 30	Penwortham ...	Scarlet Fever ...	1	1
97	Nov. 5	Penwortham ...	Scarlet Fever ...	1	2
98	" 8	Ribchester ..	Scarlet Fever ...	1	1
99	" 10	Whittingham ..	Scarlet Fever ...	1	1
100	" 14	Samlesbury ..	Mumps .	4	9
101	" 18	Grimsargh ...	Diphtheria ...	1	2
102	" 21	Penwortham ...	Scarlet Fever ...	1	1
103	" 24	Penwortham ...	Scarlet Fever ...	1	1
104	" 28	Farington ..	Scarlet Fever ...	1	1
105	Dec. 1	Penwortham ...	Scarlet Fever ...	1	1
106	" 1	Penwortham ...	Scarlet Fever ...	1	1
107	" 3	Penwortham ...	Scarlet Fever ...	1	1
108	" 3	Penwortham ...	Scarlet Fever ...	1	1
109	" 6	Penwortham ...	Scarlet Fever ...	1	2
110	" 9	Penwortham ...	Scarlet Fever ...	1	1
111	" 13	Penwortham ...	Scarlet Fever ...	1	1
112	" 16	Longton ...	Typhoid Fever...	1	1
113	" 16	Longton ..	Typhoid Fever ..	1	1
114	" 23	Grimsargh ...	Scarlet Fever ...	1	1
115	" 24	Penwortham ..	Scarlet Fever ...	1	1
116	" 30	Penwortham ...	Scarlet Fever ...	1	1
117	" 31	Farington ...	Scarlet Fever ...	1	1
				208	271

## SUMMARY.

Typhoid Fever	...	...	6
Scarlet Fever	...	...	94
Diphtheria	...	...	11
Measles	...	...	125
Erysipelas	...	..	4
Chicken Pox	...	...	22
Mumps	...	...	9

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Total number of Cases	...	271
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Do.	Infected Houses	208
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**Hospital Treatment.**

It needs no words of mine to draw attention to the increased demands made on our Joint Isolation Hospital. It is now very seldom any opposition is offered to the removal of cases to this institution. When it is considered that the risk of loss of life is minimised, markedly in cases of infectious diseases such as are admitted into these hospitals as compared with home treatment in cottages, a strong argument is produced to overcome the wounded parental feelings caused by the removal of a sick child from its home. People are becoming more thoughtful and sensible, and I feel sure the public realised the twofold advantage of institutional treatment of infectious diseases. Firstly, the increased chance of recovery. Secondly, the removal of a centre of infection whereby the safety of the surrounding population is enhanced. I should here like to say a word or two concerning the management and efficiency of our Isolation Hospital. In the first place, the ambulance arrangements are most excellent—promptness and carefulness are the two words which characterise this portion of the work. The treatment of the patients must be of the best, as no halting or stinted words of praise are ever used by the parents of the patients or the patients themselves. The reverse is the case, and on all sides I hear of the kindness of the doctor, the matron, and the nurses. Children returning to their homes have frequently given tearful evidence of their sorrow at leaving the hospital where so much kindness and attention were paid them. I should like to take this opportunity of thanking Miss Osborne for all the kindness and prompt attention I have always received at her hands.

It will be noticed that 82 cases of Scarlet Fever were healed in the hospital, out of 94 notified. Nine out of the 11

instances of Diphtheria went into this institution. The six reported cases of Typhoid Fever were all nursed at their own homes.

Townships from which cases were removed :—

*Diphtheria* :—Longton 1, Penwortham 4, Goosnargh 1, Grimsargh 3.

*Scarlet Fever* :—Ashton 1, Farington 7, Longton 1, Penwortham 57, Broughton 1, Whittingham 7, Hutton 1, Much Hoole 2, Howick 3, Grimsargh 2.

*Deaths in Hospital* :—Scarlet Fever 4—Three from Penwortham, 1 from Howick.

### Infectious Diseases (Notification) Act, 1889.

The cases notified under this Act numbered 116 (exclusive of Tuberculosis cases notified under the Tuberculosis Regulations), against 69 notifications in 1912. Scarlet Fever had an increased prevalence, viz., 94 cases against 50, Diphtheria caused 11 attacks, Enteric Fever 6, and Erysipelas 5.

I here give a table indicating for 1912-1913 the number of cases of Scarlet Fever, Diphtheria, and Typhoid Fever notified, and those sent to Hospital for treatment :—

	Scarlet Fever.		Diphtheria.		Typhoid Fever.	
	Cases notified.	Removed to Hospital.	Cases notified.	Removed to Hospital.	Cases notified.	Removed to Hospital.
1912...	50	35	10	7	6	1
1913 .	94	82	11	9	6	...

The following table will, no doubt, prove interesting. It points out clearly the number of notifiable cases together with those treated in the Isolation Hospital. An allocation to the respective townships is also shown. Although there is an increase in the direction of Scarlet Fever, the other diseases—such as Diphtheria and Typhoid Fever—are practically the same as the preceding year, and there were no instances of Puerperal Fever.





Township.	Scarlet Fever.		Typhoid Fever.		Diphtheria and Mem. Croup.		Erysipelas.		Total.	
	Cases notified.	Removed to Hospital.	Cases notified.	Removed to Hospital.	Cases notified.	Removed to Hospital.	Cases notified.	Removed to Hospital.	Cases notified.	Removed to Hospital.
Farington ...	8	7	...	...	...	...	2	...	10	7
Longton ...	3	1	2	...	1	1	...	...	6	2
Much Hoole ...	2	2	1	...	...	...	...	...	3	2
Little Hoole ..	...	...	...	..	...	...	...	...	...	..
Hutton ...	1	1	...	...	...	..	...	..	1	1
Howick ...	3	3	...	...	...	...	...	...	3	3
Penwortham ...	65	57	1	...	6	4	1	...	73	61
Samlesbury ...	...	...	1	...	..	...	...	...	1	..
Cuerdale ...	...	...	...	...	..	...	...	...	...	...
Lea, Ashton, &c	1	1	...	...	...	...	...	...	1	1
Goosnargh ...	...	...	...	...	1	1	..	...	1	1
Broughton ...	1	1	...	...	...	...	2	...	3	1
Barton ...	...	...	...	...	...	...	...	...	...	...
Haighton ...	...	...	...	...	...	..	...	...	...	...
Woodplumpton ..	...	...	1	...	...	...	...	...	1	...
*Whittingham...	7	7	...	...	...	...	...	...	7	7
Ribchester ..	1	...	...	...	...	...	...	...	1	...
Dutton ...	...	...	...	...	...	..	...	...	...	...
Hothersall ...	...	...	...	...	...	...	...	...	...	...
Grimsargh-with Brockholes...	2	2	...	...	3	3	..	...	5	5
Elston and Ribbleson ...	...	...	...	...	...	...	...	...	...	...
Total ...	94	82	6	...	11	9	5	...	116	91

\* Excluding 2 cases enteric fever, in Whittingham Asylum.

### Diphtheritic Antitoxin Order.

I had only one requisition under this Order for Diphtheritic Serum.

### Hospitals.

The Fylde, Preston and Garstang Joint  
Small Pox Hospital.

No case of Small Pox was treated in this Hospital during the year. On the 1st November this Hospital was trans-



ferred to the Lancashire County Council to be used as a Sanatorium for the treatment of advanced cases of Pulmonary Tuberculosis. To meet an outbreak of Small Pox a small Hospital is to be built to accommodate 12 patients—six of each sex. In case of an extended outbreak of Small Pox the Sanatorium would be evacuated and utilised for Small Pox purposes.

### Preston, Fulwood and Longridge Isolation Hospital.

This Institution, year by year, performs the admirable and useful function of helping to fight the inroads of certain infectious ailments; and as time rolls by people lose their shyness and objection to the treatment of their children in this Hospital. I have earlier in this report expressed my opinion as to the control and management of the Hospital. A total of 91 cases were treated from this Rural Area during 1913.

### The Sanitary Condition of the District During 1913.

The remarks I am in a position to make concerning the sanitary state of the district are very similar in nature and character to those I have written in this report from year to year. I believe I am only stating the truth when I say this Rural Area has been well supervised, week in and week out. Various localities are under inspection, so that any conditions requiring rectifying can be reported and authority obtained to serve the necessary notices. Personally I have, when necessary, accompanied and advised the Inspector of Nuisances. As stated in last year's report, repeated inspectional work was devoted to Dwelling-houses, Bakehouses, Slaughter-houses, Factories and Workshops, Cowsheds and Dairies, and Canal Boats. It must be recognised that within this Rural Area we have large villages, some mostly inhabited by persons who obtain work in local cotton mills, in others the people living there are what may be termed "Residentials," as the breadwinners to a large extent have their businesses and work in Preston. As instances of the former, I may cite Farington and Walmer Bridge; of the latter Penwortham and Hutton and Howick. Now, my point is that although we are classed as a Rural district, the portions above referred to have characteristics quite as Urban as many of the lesser Urban Sanitary Authorities, the consequence is that the discharging of official duties are as onerous, important and anxious as if the district was an Urban Authority.

So far as I know, the character and supply of houses fairly well meets the requirements of each township; and where house property is required it is built, as for example in Longton and Penwortham. I can but feel that the increased cost of building and other local causes have had the effect of damping down the erection of good class cottage property in Penwortham. However, the completion of the new bridge over the Ribble, which will give direct communication with Penwortham, may be the beginning of a new era in making this very pretty neighbourhood a rising residential locality.

I have very much to deplore the existence of some 1,825 bog-hole closets. These containers of putrid filth are, wherever they exist, an urgent menace to the public health. I trust when our sewerage and sewage disposal schemes are completed for Penwortham, Longton and Little Hoole, an effort will be made to abandon these old-fashioned abominations and substitute water carriage. There can be no objection, nor should there be delay, in pressing forward this improvement at Ribchester, where both the system of sewers and water supply exist. As a rule the indoor cleanliness of the cottage houses is commendable, although one sees exceptions to the rule; but it is the lack of care bestowed on the keeping clean the back yards of cottage property I desire to draw attention to. Let me explain conditions not infrequently met with. The yard is seldom swept or swilled; the slopstone and grid may become stopped up, and resulting from this a portion of the yard becomes flooded and saturated with slop water; scraps and the remains of meals are thrown out at the back door; and I have seen the remains of a broken chair, some salmon tins, an old dress, and a few old stockings nestling snugly in a corner of a back yard. All this demonstrates a low type of humanity and a want of interest in life. People must not depend on the Sanitary Authority, through its officials, to do everything for them. They must recognise their own responsibilities, and play the game in keeping their own houses, both inside and out, clean and tidy. The general uplifting of a community when once instructed is within itself. Failure to discharge its duties and obligations, soon brings ample punishment and degradation. There can be no shifting of responsibilities. Where back passages exist between rows of houses these should be paved. The emptying of cesspits, closets, and ashpits on to the soft surface of an unpaved back passage, creates a nuisance of magnitude. It is impossible to clear away all the contents of these receptacles. The result is that filth is left to soak in the ground and also carried into the back yards and kitchens



of the houses. From the summary of work presented by Mr. Ashcroft, your Inspector of Nuisances, it will be gathered that a great deal of useful energy has been expended—128 notices to abate nuisances of various descriptions were served, 127 infected houses were disinfected, 15 warnings to repair streets and roads were put into operation; altogether 407 items dealing with efforts to improve sanitation had attention. I again appeal to builders and private individuals who propose to erect cottages, to so arrange that each house should have a bath. It is very essential that the human body should be kept clean. There is a further advantage. The provision of a bath in each house is training those of the rising generation to recognise the necessity of cleanliness—which will never be forgotten. At the same time you are keeping both the present and rising generation clean. Once more I ask people to use the kitchen fire as a destructor for most, if not all, house and table refuse. Instead of throwing this refuse into the ashpit or ashbin, or perhaps over the surface of the back yard to putrify and stink, why not place it in the fire after dinner time, cover it with some fine coal or slack, and leave alone for a couple or three hours. No smell will have been created and the refuse will have disappeared. There is still a great disinclination to sleep with the bedroom window open, or to open the windows during the day. Words cannot be too strong to impress the necessity of sleeping in fresh air and having the home thoroughly ventilated during the day. During my house to house inspections, I am glad to say that there is a steady decrease in the practices of sealing up windows with paper packings, and that ancient privilege bestowed on housewives of stuffing the chimney tight up with old dresses, petticoats, and sacks, and then pasting brown paper or a few sheets of some illustrated paper over the front of the fire place. It is my intention to speak of matters pertaining to Scavenging, Water Supplies, &c., under separate paragraphs.

### Scavenging.

Five Parochial Committees are in existence. These bodies undertake that the scavenging of the respective areas is dealt with. Mostly this work is let by tender to farmers, and thus Penwortham is the only Committee which up to now has grasped the importance and value of keeping the scavenging of its area in its own hands. Their system is quite good, and the fact that this Committee owns its own horses, carts, and employs its own men, makes for efficiency, and I think economy as well. At all events, there is no comparison

between scavenging done under contract and the same work carried out by the Parochial Committee. I very strongly recommend to the notice of the other Parochial Committees the action of Penwortham in this matter. The adoption of similar methods to those at present in use at Penwortham would undoubtedly be in the interests of health and convenience of the inhabitants of those other parochial areas. The Committees I refer to are those of Longton, Little Hoole, Ribchester, and Farington.

### **Penwortham Sewerage and Sewage Disposal Scheme.**

The only portion of the sewage of Penwortham which is now being dealt with at the outfall works is that from some houses in Liverpool Road, Penwortham Hill, and the houses in Priory Lane, near Penwortham End Sunday School. In my last report I left this matter where the Parish Council of Penwortham, after much correspondence with the Rural District Council, appointed an independent engineer (Mr. W. H. Taylor) to report to them. No report was received up to the end of the year (1912). Now this report has been made, and practically agrees with the one propounded by the Rural District Council. An inquiry was held at Middleforth School, Penwortham, on the 21st August, 1913, by Mr. W. M. Cross, M.Inst.C.E., the object being to enable the Rural District Council to borrow £6,520 to finish this scheme.

Plans were submitted to the Local Government Board by the Engineer, Mr. Heaton, of the firm of Myres, Veevers and Myres. The Board made a few small revisions in the scheme, and it is hoped that sanction will be given, and at once, to enable the completion of the work. No words of mine can emphasise the urgent necessity attaching to the finishing of this scheme. As a whole the state of the area proposed to be sewered is bad, and a menace to the public health. In a few instances the condition of matters, from the sanitary aspect, amounts to a public scandal. The present proposition provides for a revision of the existing outfall tanks. It is proposed to convert two screening tanks to storm-water tanks, and to erect new screening and detritus chambers. Provision is also made for storm-water outlet pipes and the construction of a third bacteria filter, with a revolving sprinkler for the distribution of the tank effluent.

The low-level sewer, extending from the foot of Penwortham Brow as far as Middleforth Schools, is to be taken

up. This sewer, as at present laid, is constructed of earthenware pipes. Its construction is faulty, as it admits large quantities of infiltration water. To obviate this, cast-iron pipes are to be put in. The existing oil engines are to be replaced by electric motors. The necessary current is to be obtained from the National Electric Supply Company. The cable will be taken over the Ribble, across the Holme, and Squire Rawstorne's land, to the engine house at the outfall works. These new motors will be automatic, and will generate the necessary compressed air to work the ejectors (situated at the foot of Penwortham Brow) for the purpose of lifting the sewage up the rising main to the top of the Brow. It is now about 14 years since this scheme was begun. In the interests of the township it should have been completed long ago. Such, however, from one cause or another, has not been so. There is no use looking back, but let me look forward and express the hope that every effort will now be made to complete this urgently needed sewerage and sewage disposal scheme for the township of Penwortham.

### **Sewerage and Sewage Disposal Works for the Townships of Longton and Little Hoole.**

As is well known, this scheme has been dragging on for quite a considerable number of years, and has been much discussed. The ratepayers of these two townships have been averse to a sewerage scheme of any sort being carried out—first, on the ground of cost, and, secondly, that works of this character are unnecessary. Several meetings have been held by those interested. It was decided by the Rural District Council to ask the Local Government Board to send an Inspector to report on the necessity or otherwise of a sewerage scheme. On the 2nd of April, 1913, Mr. Hetherington, C.E., one of the Inspectors of the Local Government Board, met representatives from the Rural and Parish Councils, Mr. Heaton, the engineer, also being present. The Inspector made a thorough examination of the district to be embraced in the scheme, including the watercourses; and, although the day was not favourable for the purposes of an inspection, as much rain had fallen and the streams were swollen, he came to the conclusion from his own observations that a scheme for sewerage the area was absolutely necessary. He further intimated that he would report to the Local Government Board that it was his opinion that plans and estimates for a comprehensive scheme of sewerage for the two townships should be deposited forthwith. Thereupon Mr. Heaton was instructed by the Rural District Council to again go



thoroughly into this matter and prepare plans, sections, and estimates. These plans are now with the Local Government Board, and an early answer is expected giving the Board's decision. The scheme, as submitted, provides for the construction of outfall works, consisting of screening and detritus chambers, settling tanks, and sludge filters. The site of these proposed works has already been provisionally acquired by the Rural District Council. The sewers will be laid through land and along Liverpool Road, Marsh Lane, and Chapel Lane to New Longton, School Lane, Back Lane, Hall Carr Lane, and through the township of Little Hoole, nearly as far as the Much Hoole boundary. The lower portion of Marsh Lane cannot be drained into the outfall works. To accommodate this portion of the scheme, and to avoid pumping it is proposed to erect a small settling tank. The scheme when carried out will be sufficiently comprehensive to deal with other areas of this district as these develop.

As I said before, there was great objection to the scheme. Some large ratepayers in Little Hoole called in Mr. Charles Lomax, C.E., of Manchester, who reported, and his statement was conveyed to the Preston Rural District Council. Mr. Lomax's report practically supported the scheme accepted by the District Council.

Another important ratepayer at Longton obtained a report from Mr. J. T. Wood, M.Inst., C.E., Liverpool. In this document Mr. Wood stated that it was his opinion that opposition to the scheme would not succeed, and in the interests of the district the opposition should not succeed. Mr. Heaton's scheme covered all the areas which have population enough to warrant expenditure on draining. He found some of the sewers would not be self-cleansing, owing to the modified fall. The outfall works were carefully designed, but the tanks appeared shallow. A pumping scheme would allow of a great improvement in the levels of certain sewers. Mr. Wood strongly advocated one scheme for both districts.

The pipes will be earthenware socketted, with cement joints. Manholes of brick construction with closed cast-iron covers. Ventilation will be effected by means of ornamental cast-iron standards, placed at the summits of the various sewers. It is also proposed to place an automatic flushing apparatus in each of the chambers at the dead ends of the sewers, the water for flushing purposes to be obtained from the Council's mains. I have from year to year advocated the



carrying out of this scheme as a necessity. No argument can prevail, and it must be obvious that it is quite impossible to allow an increasing district to degenerate for the want of ordinary sanitary requirements. I have quite realised the cost of this work and its bearing on the local rates. At the same time, there is the other side of the question—Can a Sanitary Authority go on for an indefinite period keeping its eyes shut to the absolute requirements of the population and area placed under its charge? The township of Longton is, I consider, well suited for building purposes, and offers considerable advantages as a residential neighbourhood. I consider a further inducement will be offered to those who contemplate building by the completion of this sewerage and sewage disposal scheme.

### **Farington, Grimsargh and Ribchester Sewerage and Sewage Disposal Schemes.**

*Treatment :—*

*Farington :—*Open Septic Tanks, Filtration, and Land Irrigation.

*Grimsargh :—*Closed Septic Tanks and Bacteria Filters.

*Ribchester :—*Continuous Precipitation Filtration and Land Irrigation.

During the year the effluents produced have met the requirements of the Ribble Watershed Committee. The works have also been kept in a satisfactory manner. The Sprinklers and Automatic Gearing in connection with the Farington Works have been repaired and thoroughly overhauled.

### **Water Supplies.**

Samlesbury and Cuerdale.

The Water Supply to Samlesbury and Cuerdale continues to give satisfaction and undoubtedly is a great boon to the inhabitants. At present the water supply has the following distribution in Samlesbury :—2 mills, 1 sewage works, 52 farms, other houses (including public-houses) 100. There are in this Township 5 public-houses, 68 farms, other houses 115. Thus only 5 houses and 16 farms remain unsupplied. In Cuerdale there are 7 farms and 3 cottages. Four farms and one cottage are supplied with water. A supply of water is given to the Blackburn Rural District Council to meet the requirements of Balderstone and Mellor Brook. No extension of mains took place during the year.

## Ribchester and Hothersall.

I pointed out in my report for 1912, that some 10 miles of water mains have been put down in Ribchester and Hothersall, and the supply of water is obtained from the Dilworth Reservoir belonging to the Preston Corporation.

The number of houses in Ribchester at the end of 1913 was 321 (including farms), or 5 more than in 1912. Of these 257 had taken a water supply, being 7 in excess of the houses furnished with water last year.

In Hothersall there are 33 houses; 12 of these have had water laid on, an increase of 3 on the preceding year. No new mains were laid during the year 1913.

The inhabitants of Hothersall never showed a great enthusiasm for a water supply. Up to now there does not appear to have been much alteration in their line of thought, as it appears only one house in every three has requisitioned for and secured a supply of water.

## Supply of Water to the Townships South of the Ribble.

I have again to record the maintenance of an excellent water supply in the 7 townships south of the Ribble. There appear to be in the area 2,525 inhabited houses, and of these 2,312 receive a water supply from the Council's mains. There is an ever increasing demand for water in this area. I here give a table which indicates the developments, both in house construction and water supply :—

Townships.	1905		1906		1907		1908		1909		1910		1911		1912		1913	
	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.	Houses Supplied.	Inhabited Houses.
Penwortham	701	730	738	769	756	787	772	803	792	823	809	840	834	848	892	906	913	927
Howick ..	22	22	22	22	22	22	22	22	22	22	22	22	26	26	27	27	27	27
Hutton ...	76	86	78	86	80	88	89	97	94	102	100	108	112	115	115	117	115	117
Longton ..	460	490	476	505	492	521	511	540	528	557	558	586	598	605	609	614	609	618
Much Hoole	137	146	138	147	139	148	142	151	142	151	145	154	144	153	150	156	154	160
Little Hoole	120	122	122	124	123	125	125	127	127	129	128	130	124	126	128	130	132	133
Farington ..	...	...	246	438	269	451	282	464	284	467	298	481	350	534	362	543	362	543
Total ..	1516	1596	1820	2091	1881	2142	1943	2204	1989	2251	2059	2321	2168	2407	2283	2493	2312	2525

The after stated additional mains were laid in the indicated townships:—

- 81 yards of 3" main in Hutton.
- 108 yards of 3" main in Farington.
- 21 yards of 3" main in Penwortham.
- 15 yards of 4" main in Penwortham.

### Water Supply by Fulwood Urban District Council.

Ten townships receive a supply of water from the Fulwood Urban District Council. Although the increase in the number of houses taking a water supply is apparently slow, yet it is satisfactory to note that year by year there is an increase varying from a few to 20 houses. I here give a table dealing with the years 1903-1913:—

Townships.	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Grimsargh ...	70	70	73	76	77	77	77	79	80	80	83
Whittingham	54	80	85	85	89	90	90	97	101	102	103
Broughton ...	117	122	127	128	129	131	132	132	134	134	137
Haighton ...	31	31	31	35	37	37	37	37	37	38	38
Goosnargh ...	34	34	34	34	34	34	34	34	34	34	34
Ingol ...	12	12	12	12	12	14	18	18	18	18	18
Barton ...	33	33	34	35	35	35	35	39	39	57	59
Cottam ..	2	12	12	12	12	12	12	12	12	12	12
Elston ...	...	3	3	3	3	3	3	3	3	3	3
Ribbleton ...	...	...	...	...	2	3	3	3	3	3	3
Total	353	397	411	420	429	435	440	453	461	481	490



## Supply of Water to the Townships of Woodplumpton, Lea and Cottom.

There can be no doubt as to the urgent need of a water supply to these townships. I have placed this fact on record year by year. At times it appeared as if a "day of hope" was near. Up to the present this joy day only survived its birth an exceedingly short time. My last report led up to the position when the Engineer and Secretary to the Fylde Water Board intimated to Mr. Clarke (Clerk to this Council) that they would recommend their Board to grant this supply. Now I am told that some time must elapse before the Fylde Board's scheme can be completed, and though we have to be patient until this work is finished, I am very disappointed at all this delay. Here is an area where in dry weather the existing water supply absolutely fails; can any situation be worse or more desperate? Yet there appears to be insuperable difficulties to arrange for a supply; although the Authority possessing the powers to deal with these townships cannot supply water at a reasonable cost, yet it does not surrender its powers to some other Authority better situated to carry out this necessary work. However, we must "wait and see" what will happen when the Fylde scheme is completed.

### Report by the Inspector of Nuisances.

It will be gathered from Mr. Ashcroft's written report and a summary of the work done by him, that considerable earnestness and energy has been thrown into the requirement of the position he holds, when it is contemplated that 1,834 visits were made. Taking 6 working days per week these figures proved nearly 6 visits per day. The nature of these attendances is set out in Mr. Ashcroft's report. During the year 19 preliminary and 128 statutory notices were served. There yet remain with us 1,825 privy bogs in the year 1913. This nearly amounts to a standing disgrace, as I have frequently said not one of these abominations should exist, and I strongly urge the Council to at once order their abolition. Nothing can be worse than these stinking bog holes, forming breeding places for bacteria and flies. This statement goes on to deal with the Factories and Workshops, Dairies and Cowsheds, Slaughter and Bakehouses, Housing and Town Planning Act, &c.

It forms, together with its summary, a valuable contribution to this statement of mine. There can be no question

as to the good which must follow a record of a year's work such as this. I here attach the summary above spoken of:—

Description.	No.
Houses Disinfected... ..	127
Notices served to abate Nuisances .....	128
Defective Drainage of Houses, &c. ....	23
Defective Closets, Pails and Bogs being wet and deep .....	34
Dilapidated Property .....	6
Polluted Water Supplies .....	5
General Nuisances and Foul Ditches ...	19
Defective Roofs and Spouting of Houses .....	4
Limewashing .....	1
Notices served to Repair Streets and Roads ...	15
Preliminary Notices served .....	19
Final Notices served .....	3
Housing and Town Planning Notices served under the P. H. Act ... ..	23
Total .....	407

The number of houses and farm buildings erected during 1913 very nearly coincide with the previous year (1912)—72 dwellings and 24 farm buildings, as compared with 69 and 25. So far as dwelling-houses are concerned, the great bulk of those built are allocated to the townships south of the Ribble. As a matter of fact, 52 houses out of the 72 were put up in these southern townships, Penwortham and Longton claiming just half (36) of the building operations.

The table here given explains the position :—

Parish.	Dwelling Houses.	Farm Buildings.	Other Buildings.	Alterations and Additions.	New Streets.
Lea, Ashton, &c.	2	2	2	...	...
Broughton ...	2	2	...	...	...
Barton ...	...	1	...	...	...
Dutton ...	...	1	...	...	...
Farington ..	8	...	3	1	...
Goosnargh ...	...	2	...	1	...
Grimsargh ...	...	...	2	...	...
Howick ...	1	...	...	...	...
Hutton ...	...	..	2	1	...
Haighton ..	...	...	1	...	...
Longton ...	16	..	3	2	...
Much Hoole ...	2	1	3	...	..
Little Hoole ...	5	1	...	1	...
Penwortham ...	20	...	6	1	1
Ribchester ...	1	3	7	1	.
Samlesbury ..	10	1	...	...	...
Woodplumpton ...	...	6	3	...	...
Whittingham ...	3	4	1	1	...
Fernyhalgh ...	2	...	...	...	...
Total ...	72	24	33	9	1

### Enquiries made by the Medical Officer of Health respecting Conditions Injurious to Health existing in the District.

I have tried so far as I could to keep myself conversant with the sanitary conditions and wants of the townships forming this Rural area. I have when required visited and inspected areas of the district, and I have advised your Nuisance Inspector. In cases of threatened epidemic invasions I put forth every effort to stop or limit the spreading of the disease. The conditions of some of the schools have had attention and supervision. I have tendered advice in the administration of the Housing and Town Planning Act. In so far as I could I have tried to elevate and push forward the sanitary work required. Undoubtedly we are moving in the right direction. There may be those who think and say our progress is slow. It may be, but I would ask these people to remember how difficult it is to get certain sections of our



population to have anything to do with advancement. One has to live down old-fashioned prejudices, and these die hard. I have again to appeal to householders to keep both the insides and outsides of their cottage houses clean and tidy, special care being taken to see that all windows open and shut, and to be sure that each bedroom window remains open all through both day and night. Accumulations of filth in the back yards should not be permitted. These back premises should be kept scrupulously clean. House refuse ought to be consumed by means of the kitchen fire; not one scrap of this must be thrown on the yard, ashpit, or ash bin. It is by personal effort amongst persons having charge of households that a general uplifting of the conditions under which a manufacturing population lives is brought about. I don't think it is sufficiently impressed on the minds of our operative population the important ratio occupied by cleanliness both personal and domestic in relation to the enjoyment of good health, which means the prolongation of life. The issuing of this report is, I regret to say, considerably delayed. Its distribution will be just before the period when every person who lives in a house, whether the house be big or little, should do everything in his or her power to prevent the propagation of the common house fly. I do appeal to householders to co-operate with the Sanitary Authority to get rid of all breeding places for flies. We do not realize the danger of diseases conveyed by this filthy, germ-carrying house fly. It is quite recognised that a house fly can carry on its body, legs, and in its mouth and transmit the micro-organisms which produce Typhoid Fever, Cholera, and Tuberculosis, and perhaps Diphtheria and Small Pox. Undoubtedly these flies are specially active in spreading Infantile Enteritis commonly known as Infantile Diarrhœa, which is so fatal to infantile life during our hot summers. I here quote the life history of a house fly. This I have taken from a letter which appeared in the Press on the 6th of April, and was signed by some 123 Medical Officers of Health :—

“In the spring the female leaves some warm, dirty  
 “nook where she has been hibernating, and sets out to  
 “lay her eggs. She chooses for the purpose a manure  
 “heap, or any collection of refuse, garbage, or offal, and  
 “lays at each sitting, of which there are several,  
 “as many as 120 eggs. In a few hours, if the  
 “surroundings are warm, the maggot is born. It eats  
 “the filth in which it lives, casting its skin as it grows.  
 “About five days after its birth it becomes a chrysalis, a  
 “minute, rolled-up, bean-like body, less than a quarter



“ of an inch in length. After a further five days, if the weather is favourable, the fly emerges and sets out in search of food. Mouth, legs, and body become smeared with the fly’s food, so that not only does it spread disease by swallowing germs, but furnishes for them a suitable breeding place on the outside of its limbs.”

This is a short outline as to how the house fly develops. It is quite clear, seeing that the female fly is so prolific that it must be possible for one fly to have millions of descendants in a week or two. It is, furthermore, nearly useless trying to kill flies in detail. The proper method is to attack them in their breeding places, such as refuse, garbage, offal, and middens of all kinds. Undoubtedly the most effectual method of ridding ourselves of these filthy pests is to keep the back yards of houses scrupulously clean. Rubbish, in large or small quantities, should on no account be allowed to accumulate. Ceilings and walls should be limewashed, and windows must be kept open, so that a free current of air be allowed to pass through the house. Middens containing horse manure should be frequently removed. It is up to housekeepers to keep down the fly pest. It is quite possible to diminish the number of flies if not wholly to exterminate them, and if everybody does this much can be done. It may be taken for granted that these few words, “ No dirt, no flies,” are perfectly true.

### **New Streets at Penwortham.**

I have for some considerable time advocated the construction of the new streets at Middleforth. Their condition is exceedingly bad, I regret to say. The delay in completing the sewerage scheme has still retarded this matter.

### **Slaughter-houses.**

The number of slaughter-houses is, as reported last year, eleven. The Inspector of Nuisances has visited these structures. He has had on several occasions to complain to owners of the insanitary state of some of these slaughter-houses. I feel that the Council will be quite justified in acting with the greatest stringency in matters of carelessness in want of proper methods to obtain the utmost cleanliness of these buildings. I should like to ask what can be worse than to have human food killed and dressed surrounded with filth and other insanitary details.

### **Bakehouses.**

The number of bakehouses is eleven. These have all been inspected, and there is no complaint as to their sanitary condition. All appear to conform to the bye-laws. and the Nuisance Inspector speaks of them as being satisfactory.

### **Factories and Workshops Acts.**

There has been an increase of five workshops during the year. The totals on the register are 12 factories and 79 workshops. With one exception all were satisfactory when inspected. The case of default was one of want of lime-washing. Close attention is given by Mr. Ashcroft to the sanitary condition of the factories and workshops. Provision for escape in case of fire is provided. It is satisfactory to know that these factories and workshops are in order.

As the question of abolishing half-time employment for children is occupying a prominent position, I should like to give my opinion. I feel that I have been able to observe the physical condition of children employed for half-time as I have occupied the position of certifying factory surgeon for more than a quarter of a century. I say without hesitation that the life in a present-day cotton mill is quite as healthy, if not more so, than in a school. My experience leads me to believe that children employed half-time develop well and improve in health. To abolish half-time employment would be against the health interests of the great majority of the children. I don't for one hold with the idea that parents should look upon their children as machines from which so much money must be obtained. This has been said, but I think such a construction of the position of parent to child is most unjust to the average Lancashire parent. Generally speaking, no such desire prevails. It must further be remembered that the average child of 12 years of age is quite capable of beginning to learn his or her work as a weaver, or in any other branch of the trade. If you delay the child in starting to learn you will diminish the quality and ability of the full-time weaver. In other words, you won't get as good a weaver if the statutory age for beginning work is increased. Let it not be forgotten that the certifying surgeon has the ordering of the employment suitable to the physical capabilities of the child.

### **Dairies, Cowsheds, and Milk Shops Order.**

Three hundred and eighty-one names now appear on the

register under this Order. This means that six additional names have been added during the year. Throughout the year a great many of these farms have been inspected. Some are reported as clean. In regard to the cows, shippens and yards and other cases, I am sorry to say just the opposite prevails. Notices in these instances have been served, and in others directing attention to water supplies.

### **Housing and Town Planning Act.**

Mr. Ashcroft has during 1913 devoted his attention to the township of Penwortham, where he visited and inspected 102 houses. In all 472 houses have received attention. As many of the complaints were not of a serious nature, such as some structural defects requiring repairs, deep and wet bog-holes, want of ventilation, dampness, and the paving of back yards, the Council ordered notices to be served under the Public Health Act. In all, 23 notices were given.

### **Petroleum Act.**

Five persons applied for licences to store and sell, or expose for sale, petroleum upon their premises. On inspection there was found no objection, as suitable storage could be provided. The Council granted these licences.

### **Anthrax.**

Three outbreaks of Anthrax were notified to me by the police. Feb. 7th, an outbreak at Lower Green Nook Farm, Whittingham; 5th June, an outbreak at Yates Farm, Samlesbury; Aug. 4th, an outbreak at Sand Bank Farm, Grimsargh. All the carcasses were destroyed, and thorough disinfection carried out.

### **Tuberculosis (Cattle Order) 1913.**

The following cases of tuberculosis were notified by the Lancashire County Council since the 23rd June. These animals were killed and their bodies destroyed :—

Barton ... ..	3	Hutton ... ..	6	Penwortham....	6
Broughton ... ..	5	Haighton .. ..	2	Samlesbury ...	6
Cuerdale ... ..	3	Howick... ..	1	Ribbleton .....	2
Elston.. ... ..	1	Ingol .. ...	1	Ribchester ...	2
Farington ... ..	1	Longton ... ..	5	Whittingham...	6
Goosnargh ... ..	5	Little Hoole...	3	Woodplumpton	2
Grimsargh ... ..	2	Much Hoole...	9		

In all 68.



### Canal Boats Act.

The following is Mr. Ashcroft's Report on his inspection of Canal Boats :—

I beg to report that during the year 1913 I made 28 visits to the Lancaster Canal for the purposes of inspection. I have examined 16 canal boats.

The certificates of all the boats corresponded with the number of children allowed on them :—

Number of men on the boats ..	...	...	24
Number of women on the boats ...	..	...	12
Number of children between 5 and 12 ..	...	...	2
Number of children 5 years and under ...	...	...	5

I have no complaints to make with regard to the sanitary state of the boats, each of which I found in good condition and very clean.

The children between 5 and 12 years of age were away from school on holidays.

### Some Information Relative to Deaths and Births during 1913.

#### AREA.

The area under the jurisdiction of the Preston Rural District Council is given by the Registrar General in his report on the Census of 1911 as 52,929 acres (statute). The area of each of the townships comprising this rural district is given on Table V.

#### POPULATION.

The Census of April, 1911, showed that the population at that time was 20,933; males 10,123, females 10,810; and there were 4,178 families or separate occupiers. For the purpose of calculating the various averages relative to deaths and births contained in this report, the number of the inmates in the County Asylum, Whittingham (2,089), and the inmates of the Workhouse at Ribchester (84), are excluded, leaving the normal population of the rural area at 18,760; and on this figure I estimate the death and birth rates for the year 1913.

## DEATHS.

During the year under review 355 deaths were registered in the district; but this number includes 135 deaths in the Whittingham Asylum and 1 death in the Ribchester Workhouse. The latter death and 134 of the Asylum deaths were of persons not belonging to the Preston Rural Area. and are therefore excluded from the mortality averages. Four other deaths are excluded, as the deceased persons had their usual place of abode outside this area. From the County Health Department I received particulars of 22 deaths occurring in various places and institutions of persons of whose usual place of residence was in this district, and these deaths must be taken into account in arriving at the rates of my district. The nett deaths actually belonging to this area are therefore  $355 - 1 - 134 - 4 + 22 = 238$ . Of these 111 were males and 127 females.

The corrected death-rate, calculated per 1,000 of the population, was 12·68, or 0·43 per 1,000 below the rate of 1912. In 1911 it was 12·78, 13·5 in 1910, 14·8 in 1909, 12·8 in 1908. The average for the 10 years 1903-12 was 13·99, or 1·31 per 1,000 above the rate for the year under report, which was the lowest ever recorded for the district.

The crude death-rate, as shown in the Local Government Board Table I., was 18·9; but this is of no value whatever, as it includes the whole of the deaths in the Public Institutions situate in this area.

The Township death-rates, as usual, fluctuated considerably, owing in some instances to the small population.

The highest rates were attained in Broughton 22·16, Longton 17·35, Samlesbury 16·0, Elston and Ribbleson 15·74, and Little Hoole 15·76. Low rates were recorded at Hothersall 6·75, Grimsargh and Brockholes 6·07, Whittingham 5·61, Haighton 4·90, and Cuerdale nil.

The table here given is exponent of the usual method of dealing with this subject:—

Years.	Under 1 year.	1 year and under 5 years.	5 and under 15.	15 and under 25.	25 and under 65.	65 and up- wards.	Totals.	Death Rate per 1000 of the Population.	Average for 10 years, 1903-1912.
1903	50	18	5	10	75	70	228	14.25	14.03
1904	39	18	8	11	81	86	243	15.19	
1905	37	19	15	12	81	63	227	14.19	
1906	54	23	13	9	61	72	232	14.50	
1907	38	22	13	12	78	79	242	15.12	
1908	42	14	8	6	61	75	206	12.87	
1909	37	14	10	12	80	84	237	14.81	
1910	32	11	6	7	82	79	217	13.56	
1911	38	19	8	9	97	70	241	12.78	
1912	34	13	7	8	89	95	246	13.11	
1913	42	16	9	3	91	77	238	12.68	

To the Seven Principal Epidemic Diseases 16 deaths were ascribed, viz.:—Scarlet Fever 4 (all in Hospital), Enteric Fever 2, Measles 1, Whooping Cough 1, and Diarrhœa 8. Under the latter heading are now included such deaths as Gastro-Enteritis and Enteritis.

The mortality average for these diseases corresponded to 0.85 per 1,000 of the population, as compared with 0.53 last year, 0.68 in 1911, 0.37 in 1910, and an average of 0.70 for the ten years 1903-12.

The tabular statement below gives the Townships in which the above deaths occurred, and also the age and sex:—

Disease.	Township.	Age.	Sex.
Scarlet Fever	Penwortham	3 years	F.
„	„	2 years	F.
„	„	4 years	M.
„	Howick	2 years	M.



Enteric Fever	...	Penwortham	...	49 years	...	F.
„	...	Longton	...	31 years	...	M.
Measles	...	Much Hoole	.	4 years	...	M.
Whooping Co'gh...		Little Hoole	...	5 mos.	...	M.
Diarrhœa (Gastro-Enteritis)	...	Farington	...	65 years	...	F.
„	...	Little Hoole	...	4 mos.	...	M.
„	...	Farington	...	3 mos.	...	M.
Diarrhœa (Enteritis)	...	Farington	...	1 month	...	M.
Diarrhœa (Gastro-Enteritis)	...	Penwortham	...	6 mos.	...	M.
„	..	Hutton	...	19 days	...	M.
Diarrhœa (Enteritis)	...	Whittingham	...	25 years	...	F.
„	...	Little Hoole	...	1 month	...	M.

### Infantile Mortality.

Forty-two deaths occurred amongst children under the age of one year, and these, calculated on the number of registered births, gave a rate of 110 per 1,000, as compared with a rate of 87 last year, 103 in 1911, 74 in 1910, 93 in 1909, and an average of 97 for the 10 years 1903-12.

Nine of the deaths were amongst infants under the age of one week. Table IV. in the Appendix analyses the causes of death, and it will be seen that 14 of the deaths, or 30 per cent. of the total infant deaths, were due to congenital malformations, premature birth, debility, &c. Six deaths were due to convulsions, eight to bronchitis and pneumonia, six to diarrhœa and enteritis, and eight to various causes.

I should desire most respectfully to call the attention of the medical profession to the fact of the great importance attached to diarrhœal diseases as associated with the infant death-rate. In the certification of deaths it is yet frequently found that such terms as "gastro-intestinal catarrh," "gastro enteritis," and "muco-enteritis" are used. These terms are now discontinued and condemned by the nomenclature of the Royal College of Physicians, and should not be used. The Registrar-General recommends the use of epidemic diarrhœa, zymotic enteritis, or infective enteritis, in the certification of diarrhœal diseases. It would be an assistance every medical officer of health would value if medical men would use these more definite terms.

The number of deaths due to the principal epidemic diseases during 1913 are contrasted with the years 1903-12 in the following table :—

Year.	Measles.	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Diarrhoea & Dysentery.	Whooping Cough.	Totals.	Epidemic Death Rate per 1000 of the population.	Mean epidemic Death Rate for 10 years, 1903-1912.
1903...	1	1	1	3	4	4	14	0·87	} 0·71
1904 .	4	1	2	2	3	1	13	0·81	
1905..	...	3	3	1	2	3	12	0·75	
1906...	3	1	6	3	7	...	20	1·25	
1907...	1	2	3	1	1	4	12	0·75	
1908 ..	1	...	2	2	...	2	7	0·43	
1909...	4	...	2	1	1	3	11	0·68	
1910...	...	1	...	...	3	2	6	0·37	
1911...	4	1	2	..	5	1	13	0·68	
1912...	2	3	...	2	2	1	10	0·53	
1913...	1	4	...	2	8	1	16	0·85	

The following is a table showing the number of demises in each Quarter for the present year and the 10 preceding years :—

	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
1st Quarter	52	67	60	64	73	64	64	54	65	83	73
2nd Quarter	63	67	62	47	67	57	67	47	55	61	58
3rd Quarter	51	50	53	50	48	36	39	62	55	44	54
4th Quarter	62	59	52	71	54	49	67	54	66	58	53
Total ...	228	243	227	232	242	206	237	217	241	236	238

The table below classifies the 77 deaths of persons 65 years of age and upwards. The death over 90 years of age occurred at Little Hoole, the actual age being 92 years :—

Years.	Deaths over 65 and under 70 years.	Deaths over 70 and under 80 years.	Deaths over 80 and under 90 years.	Deaths over 90 years.	Totals.
1902 ...	15	41	20	...	76
1903 ...	18	38	13	1	70
1904 ...	18	37	28	3	86
1905 ..	16	34	11	2	63
1906 ...	16	38	17	1	72
1907 ...	16	36	24	3	79
1908 ...	16	41	17	1	75
1909 ...	28	36	18	2	84
1910 ...	24	39	15	1	79
1911 ..	18	37	13	2	70
1912 ...	21	50	22	2	95
1913 ...	20	33	23	1	77

The following table shows the birth and death-rates of the Preston Rural District for the year 1913, contrasted with the rates for England and Wales, and also with the rates for the combined Rural districts of Lancashire ; the latter however are for the year 1912 :—



	Birth Rate per 1000 of the Population.	Death Rate per 1000 of the population.	Epidemic Death Rate.	Rate of Deaths of Infants under one year to 1000 registered Births.
England and Wales, 1913 ...	23.9	13.4	1.20	109
Rural Districts in the County of Lancaster, 1912 ...	21.42	12.60	0.73	89
Preston Rural District 1913 ...	20.30	12.68	0.85	110

The table next introduced explains the Births and Deaths registered in the four sub-registration areas:—

Sub-District.	Births.			Deaths.		
	Males.	Females	Total.	Males.	Females	Total.
Walton ..	9	8	17	10	4	14
Alston ..	19	14	33	14	10	24
Longton ...	114	108	222	62	74	136
Broughton ...	50	58	108	25	39	64
Whole District...	192	*189	*380	111	127	238

\* Includes one birth transferred to the Rural District by the Registrar-General.

### Deaths from Bronchitis and Pneumonia.

The deaths from the above mentioned diseases numbered 26 (bronchitis 14, pneumonia 12.) The mortality rate calculated per 1000 of the population was 1.38, as compared with a rate of 1.59 last year. Reference to Table VI will show the deaths each month. In March there were 5 deaths, and 4 in February.

### Phthisis (Pulmonary Tuberculosis.)

Fifteen deaths were ascribed to pulmonary tuberculosis (Phthisis) and these give a death-rate corresponding to 0·79 per 1000 of the population. Last year 11 deaths to place, or a rate of 0·58,

### Births.

The total number of Births registered in the district was 380, and 1 birth, occurring elsewhere, is transferred to the district by the Registrar-General, making a total of 381, or 6 less than 1912; males 192, females 189. Illegitimate births numbered 5; males 2, females 3.

The birth-rate corresponded to 20·30 per 1000 of the population, or 0·32 below the rate for the year 1912. In 1911 the birth-rate was 19·4, 26·9 in 1910, 24·6 in 1909, and the average of the ten years, 1903-12 was 24·8.

The table here given shows the number of births occurring in each quarter of 1913 and the preceding 10 year :—

Years.	First Quarter.	Second Quarter.	Third Quarter.	Fourth Quarter.	Totals.
1903	97	100	105	108	410
1904	104	108	111	91	414
1905	102	118	115	86	422
1906	104	98	99	110	411
1907	111	116	98	89	414
1908	120	92	130	104	446
1909	99	98	100	97	394
1910	112	111	111	97	431
1911	90	94	97	85	*367
1912	104	91	97	95	387
1913	105	92	101	82	*381

\* Includes one birth transferred to the Rural District by the Registrar-General.

The foregoing statement constitutes my Annual Report for the year 1913, I feel confident that when read it will demonstrate to the mind of the reader that sanitary measures

now occupy a position of importance quite different to a few years since. To most Medical Officers the progress is slow, and I am so minded on this point, yet we have to accept the position as it stands, it is undeniably a much improved position, on the other hand the Medical Officers of Health must admit that great advancements costs "great money." With increasing rates and the terribly accentuated cost of living I certainly say the ratepayer should have his opportunity of speaking, at the same time the ratepayer must please remember that the advancement of sanitation amounts to a national asset by saving lives and in increasing physical and mental development of our people.

I trust this report may have the approval of the Members of this Council.

I have the honour to be,

Your obedient servant,

CHARLES J. TRIMBLE,

Medical Officer of Health.

Louth House,  
Bamber Bridge,  
Near Preston,  
April, 1914.



*To the Chairman and Members of the Preston Rural District Council.*

Gentlemen,

I have the pleasure of presenting my report on the nuisances and other matters dealt with during the year 1913.

The number of visits and inspections made were 1,834, which include dwelling-houses, cowsheds, slaughter-houses, factories, workshops, canal boats, bakehouses, and housing and town planning; also inquiries and inspections made in regard to cattle under the Diseases of Animals Act and Tuberculosis Order, 1913. Since the 23rd of June last 71 cases of tuberculosis have been notified.

During the year 19 preliminary notices were served, and 128 statutory notices. Sanitary work accomplished included the following :—Many old drains taken up, cleaned, and re-laid; new drains laid, 139; defective closet pails and privy bogs, being wet and deep, 34; polluted water supply, 5; general nuisances, 19; defective roofs and spouting of houses, 4; inspection and visits of canal boats, 28; new houses erected numbered 72; farm buildings, 24; other buildings, 33; alterations and additions, 9; houses disinfected numbered 127; four samples of water were taken for analysis. There are approximately 1,825 privy middens in the district, 333 fresh-water closets, 425 waste-water closets, and 873 pail closets. There were three cases of anthrax reported.

**Dairies, Cowsheds, and Milk Shops Order.**

There are 381 persons registered as purveyors of milk in the Council's district. On the whole the cowsheds are kept fairly clean, but in several cases I had to call attention to the servants and cowmen being allowed to milk cows with clothes and hands in a dirty state, and in some cases it is quite time proceedings were taken to compel them to keep themselves in a clean condition, if allowed near the milk.

Several notices have been served on the farmers to keep their shippens, yards, &c., in a more sanitary condition; also notices as regard bad water supplies.

### **Housing and Town Planning Act.**

I have now to report that 102 houses in the township of Penwortham have been visited and inspected under the Housing and Town Planning Act, 1909. The total inspection is now brought up to 472. As many of the complaints were not of a serious nature, the Council instructed notices under the Public Health Act to be served in 23 instances. The general character of the defects were for want of structural repairs, deep and wet privy bogs, want of ventilation, dampness, and the paving of back yards.

### **Factory and Workshop Act, 1901.**

There was an increase of five workshops during the year, making a total now on the register of 79 workshops and 12 factories.

All have been inspected and found in order with one exception, which required limewashing. A notice was served, and was complied with.

### **Petroleum Act.**

Five persons have made application during the year for a licence to keep and sell, or expose for sale, Petroleum upon their premises. On inspection I found all their places suitable for the storage of Petroleum, and the Council granted them licences.

In any sanitary matter that I have had any doubt about, I have always called the Medical Officer of Health's attention to it, and we have inspected the case together, and the doctor has given me every assistance.

I am, Gentlemen,

Your obedient Servant,

THOMAS ASHCROFT, M.S.I.A.

TABLE I.

PRESTON RURAL DISTRICT.—Vital Statistics of whole District during 1913 and previous years.

Year.	Population estimated to middle of each year.	Births.			Total Deaths registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Un-corrected number.	Nett.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 year of age.		At all ages.	
			Number.	Rate.					Number.	Rate per 1000 nett Births	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1908	15997	446	...	27.88	369	23.06	163	...	42	94	206	12.87
1909	15997	394	...	24.62	392	24.50	170	15	37	93	237	14.81
1910	15977	431	...	26.94	348	21.75	137	6	32	74	217	13.56
1911	18845	366	367	19.47	346	18.36	124	19	38	103	241	12.77
1912	*18760	387	387	20.62	376	20.04	149	19	34	87	246	13.11
1913	*18760	380	381 Males 192 Females 189	20.30	355	18.92	139	22	42	110	238 Males 111 Females 127	12.68

Area of District in Acres, 52,929.

Total population at all ages at Census of 1911, 18,760\* ; Number of inhabited houses, 4,197 ; Average number of persons per house, 4.4.

\* Excluding a population of 2,089 in County Asylum at Whittingham, and 84 in the Workhouse at Ribchester.





TABLE II.

Cases of Infectious Diseases notified during the Year 1913.

Notifiable Disease.	Number of Cases Notified.								Total Cases Removed to Hospital.	Deaths in Hospital of Patients Removed from this District.
	At all Ages.	At Ages—Years.								
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and up-wards.		
Diphtheria (including Membranous Croup)	11	...	3	6	...	1	...	1	9	...
Erysipelas	5	...	...	...	...	5	...	...	...	...
Scarlet Fever	94	...	22	66	4	1	1	...	82	4
Enteric Fever	6	...	...	2	1	1	2	...	...	...
Pulmonary Tuberculosis	18	...	...	1	4	11	1	1	...	...
Other forms of Tuberculosis	8	...	...	3	2	1	2	...	...	...
Totals	*142	...	25	78	11	20	6	2	91	4

\* Excluding 2 cases of Enteric Fever and 1 case of Pulmonary Tuberculosis at the County Asylum, Whittingham.





TABLE III.

Causes of and Ages at Death during the year 1913.

Causes of Deaths.	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.									Total Deaths whether of "Residents" or "Non-residents" in Institutions in the District.
	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	
	2	3	4	5	6	7	8	9	10	11
All causes { Certified ... ..	234	42	4	12	9	3	29	60	75	...
{ Uncertified ... ..	4	...	..	...	...	...	...	2	2	...
Enteric Fever ... ..	2	...	...	...	...	...	1	1	...	...
Measles ... ..	1	...	...	1	..	...	...	..	..	...
Scarlet Fever ... ..	4	...	...	4	...	..	...	..	...	...
Whooping Cough ... ..	1	1	...	...	...	...	...	...	...	...
Influenza ... ..	3	1	...	1	...	...	..	...	1	1
Phthisis (Pulmonary Tuberculosis)	15	...	...	..	1	3	7	4	.	31
Tuberculosis Meningitis ... ..	1	...	...	...	1	...	...	...	...	...
Other Tuberculous Diseases ... ..	3	1	...	...	...	...	...	2	...	1
Cancer, malignant disease ... ..	11	...	...	...	..	...	2	6	3	6
Rheumatic Fever ... ..	3	..	...	...	...	...	2	1	...	...
Meningitis ... ..	4	2	..	...	2	..	...	...	...	1
Organic Heart Disease ... ..	31	...	1	...	...	...	1	16	13	13
Bronchitis ... ..	14	5	2	...	...	...	1	3	3	3
Pneumonia (all forms) ... ..	12	3	...	4	...	..	3	2	...	12
Other diseases of respiratory organs	6	1	...	...	...	..	1	...	4	1
Diarrhoea and Enteritis ... ..	8	6	...	...	..	...	1	.	1	3
Cirrhosis of Liver ... ..	2	...	...	..	...	...	...	2	...	1
Nephritis and Bright's Disease ...	13	...	...	1	2	...	2	4	4	7
Puerperal Fever ... ..	...	...	...	...	...	..	...	...	...	1
Other accidents and diseases of Pregnancy and Parturition ...	2	...	...	...	...	...	2	...	...	...
Congenital Debility & Malformation including Premature Birth ...	14	14	..	...	...	...	...	...	..	...
Violent Deaths, excluding Suicide	6	...	...	1	1	...	2	2	...	...
Other Defined Diseases ... ..	75	8	1	...	2	...	4	16	44	53
Diseases ill-defined or unknown ..	7	...	...	...	...	...	..	3	4	2
Totals ... ..	238	42	4	12	9	3	29	62	77	136



TABLE IV.

Infantile Mortality during the year 1913.

Causes of Death.		Under 1 week	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under one year.
All Causes	Certified . . . .	9	2	3	2	16	7	7	7	5	42
	Uncertified .....	...	...	...	...	..	...	...	...	...	...
Whooping Cough .....		...	...	..	...	...	...	1	...	...	1
Abdominal Tuberculosis . . . .		...	...	...	...	...	...	...	1	...	1
Meningitis (not Tuberculous)...		...	...	...	...	...	...	1	1	...	2
Convulsions .....		...	...	...	...	...	1	1	3	1	6
Bronchitis .....		...	...	2	...	2	2	...	...	1	5
Pneumonia (all forms) .....		...	...	...	1	1	...	...	1	1	3
Diarrhœa .....		...	..	...	...	...	1	...	...	...	1
Enteritis .....		...	...	1	..	1	1	2	1	...	5
Atelectasis .....		1	...	...	...	1	...	...	...	...	1
Congenital Malformations .....		...	...	...	...	...	...	...	...	1	1
Premature Birth .....		2	...	...	...	2	...	...	...	...	2
Atrophy, Debility, Marasmus...		5	2	...	1	8	...	2	...	1	11
Other Causes .....		1	...	...	...	1	2	...	...	...	3
Totals .....		9	2	3	2	16	7	7	7	5	42

Nett Births in the year { legitimate 376 }  
 { illegitimate 5 } 381.

Nett Deaths in the year of { legitimate infants 39 }  
 { illegitimate infants 3 } 42.





TABLE V.

TOWNSHIPS.	Area in Acres.	Population, Census, 1911,	Deaths during 1913.			Deaths in 1912.	Death Rate per 1000 of the Population.		Illegitimate Deaths, 1913.	Illegitimate Deaths, 1912.	Births during 1913.			Births in 1912.	Birth Rate per 1000 of the Population.		Illegitimate Births, 1913.	Illegitimate Births. 1912.
			Males.	Females.	Totals.		1913	1912			Males.	Females.	Totals.		1913	1912		
Farington .....	1862	2321	16	17	33	31	14·21	13·35	1	...	23	21	44	51	18·95	21·97	1	...
Longton .....	3383	2362	19	22	41	40	17·35	16·93	...	...	23	25	48	46	20·32	19·47	..	...
Much Hoole .....	1757	627	5	2	7	12	11·16	19·13	...	1	4	6	10	8	15·94	12·75	...	...
Little Hoole .....	1236	524	4	4	8	6	15·26	11·45	...	...	12	6	18	8	34·35	15·26	...	...
Hutton .....	2567	472	4	...	4	5	8·47	10·59	1	...	7	6	13	4	27·54	8·47	...	...
Howick .....	745	81	1	...	1	..	12·34	...	...	...	..	3	3	2	37·03	24·69	...	..
Penwortham .....	2011	3517	13	29	42	41	11·94	11·65	1	...	45	41	86	84	24·45	23·88	1	3
Samlesbury .....	4384	875	10	4	14	11	16·00	12·57	..	...	8	8	16	18	18·28	20·57	...	1
Cuerdale .....	689	52	...	...	...	...	...	...	...	...	1	...	1	2	19·23	38·46	...	...
Lea, Ashton, Ingol & Cottam .....	3098	799	3	7	10	5	12·51	6·25	...	1	5	7	12	13	15·01	16·27	1	...
Goosnargh .....	8329	1068	5	6	11	22	10·29	20·59	...	...	11	11	22	28	20·59	26·21	...	1
Broughton .....	2357	722	5	11	16	9	22·16	12·46	...	...	6	10	16	13	22·16	18·00	...	1
Barton .....	3055	432	2	2	4	5	9·25	11·57	...	...	6	4	10	11	23·14	25·46	...	...
Haughton .....	1077	204	1	...	1	3	4·90	14·70	...	..	1	..	1	9	4·90	44·11	...	..
Woodplumpton .....	4986	1226	7	8	15	15	12·23	12·23	...	...	10	16	26	26	21·20	21·20	2	1
Whittingham .....	3193	*1146	2	5	7	13	5·61	10·43	...	1	11	10	21	19	16·85	15·24	...	...
Ribchester .....	2224	†1231	8	7	15	16	12·18	12·99	...	...	13	7	20	23	16·24	18·68	...	1
Dutton .....	1908	232	2	1	3	2	12·93	8·62	...	...	...	4	4	4	17·24	17·24	...	..
Hothersall .....	1065	148	1	..	1	4	6·75	27·02	...	...	3	2	5	5	33·78	33·78	...	...
Grimsargh and Brockholes .....	1748	494	2	1	3	5	6·07	10·12	...	..	3	...	3	9	6·07	18·21	...	1
Elston and Ribbleton .....	1264	127	1	1	2	1	15·74	7·87	...	...	...	1	1	4	7·87	31·49	...	...
Inward Transfer .....	...	...	Included above.			...	...	...	...	...	...	1	1	...	...	..	...	...
TOTALS .....	52929	18760	111	127	238	†246	12·68	13·11	3	3	192	189	381	387	20·30	20·62	5	9

\* This Population does not include the inmates (2089) of Whittingham Asylum, and 134 deaths in the Asylum not belonging to the Preston Rural District are excluded.  
† " " (84) of Ribchester Workhouse and 1 death in the Workhouse.  
‡ 22 Deaths included which took place outside the District among persons belonging thereto, and 4 deaths occurring in the District amongst persons not belonging thereto are excluded.

		1913	1912
Deaths under 1 year ... .. 42	Rate per 1,000 Registered Births	110·23	87·85
„ over 1 year and under 5 years 16	„ of the Population	0·85	0·69
„ at 65 and upwards ... .. 77	„ „	4·10	5·06



TABLE VI.

	Births in 1913.			Deaths in 1913.			Deaths due to Bronchitis and Pneumonia		Deaths due to Phthisis.	
	Males.	Females.	Total.	Males.	Females.	Total.	1913	1912	1913	1912
January ...	16	18	34	8	11	19	2	4	1	2
February ...	17	11	28	8	16	24	4	7	3	1
March ...	22	21	43	11	19	30	5	2	...	...
April ...	16	18	34	7	15	22	3	2	2	3
May ...	17	17	38	8	8	16	2	1	...	1
June ...	13	11	24	9	11	20	...	3	2	...
July ...	18	12	30	11	11	22	2	1	...	1
August ..	17	21	38	10	11	21	...	1	4	...
September..	17	16	33	6	5	11	1	...	..	...
October ...	12	21	33	7	6	13	1	3	1	2
November...	13	10	23	10	5	15	3	4	1	...
December ...	14	12	26	16	9	25	3	2	1	1
Inward transfer	...	1	1	...	...	...	...	...	...	...
Totals ...	192	189	381	111	127	238	26	30	15	11

CHARLES J. TRIMBLE,

L.R.C.S. Ire., L.R.C.P. Ed., D.P.H.,

Louth House,

Medical Officer of Health.

Bamber Bridge, nr. Preston,

15th April, 1914.



## Summary of Medical Officer's Report for 1913.

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RURAL DISTRICT OF PRESTON.—Medical Officer of Health, CHARLES J. TRIMBLE; Salary, £130; Inspector of Nuisances, THOS. ASHCROFT; Salary, £185.

What is the character of the Hospital Accommodation?—For Small-pox, New Hospital being built at Elswick; for other Infectious Diseases, Joint Isolation Hospital.

Number of Beds available for your District?—For Small-pox, 6 beds for each sex in the Joint Hospital now being built for use of Joint District; for other Infectious Diseases, the Hospital is available as required to all areas.

Number of cases removed to Hospital from your District?—Small-pox nil. Enteric Fever 0; Diphtheria 9, Scarlet Fever 82, Total 91.

Deaths in Hospital of patients from your District?—From what causes?—4 Scarlet Fever—3 from Penwortham and 1 from Howick.

How is Disinfection carried out?—Houses, Sulphuric Acid Gas and Formalin Vapour. Number of Houses Disinfected?—127. Apparatus used for Clothing, Bedding, &c. (steam or otherwise)?—Steam Disinfection. Where is Apparatus situated?—At the Infectious Hospital. If Apparatus at a Hospital is available it is used for the disinfection of Clothing, Bedding, &c., of patients not removed to the Hospital? When necessary.

Are any Diseases not specifically mentioned in the Infectious Diseases Notification Act notifiable (for instance, Measles, Whooping Cough, Diarrhœa, Chicken Pox Ophthalmia Neonatorum, &c.)? If so, what are they?—Ophthalmia Neonatorum and Acute Poliomyelitis.

Diseases specially prevalent?—Scarlet Fever, Measles, Mumps. Period?—Scarlet Fever, all the year; Measles, January and September; Mumps, September.

Any Schools closed?—Yes. If so, for what disease?—Measles and Mumps. Number of Special Reports made under Article XIX. (15 and 16) Sanitary Officers' Order, 1910?—None.

Bacteriological Examinations. Number and nature of specimens examined? None.

Arrangement (if any) made under the Diphtheria Anti-toxin Order, 1910? Yes, issued free to Medical Men.

“The Housing of the Working Classes Acts, 1890 to 1909”—Has your Authority determined the procedure to be adopted for the inspection of your District as required by Article 1 of the Regulations?—Yes. Has your Authority prepared, as required by Article 1 (3), a list of dwelling-houses, the early inspection of which is desirable?—Yes. Has your Authority designated an officer to undertake the special inspection of houses and to keep the records stipulated by Article 2. If so, what officer?—Inspector of Nuisances. Have the necessary books, forms, &c., for keeping the required records been obtained?—



Yes. Action taken in 1913:—Number of dwelling-houses inspected under Section 17 of the Act of 1909?—102. Number of dwelling-houses considered unfit for human habitation?—None. Number of representations to Authority with a view to making Closing Orders? None. Number of Closing Orders made?—None. Number of dwelling-houses in which defects were remedied without making Closing Orders?—23. Number of dwelling-houses put into a fit state of habitation after making Closing Orders?—23. Number of dwelling-houses demolished?—None. General character of defects found to exist?—Structural repairs, deep and wet privy bogs.

Is there a deficiency of Housing Accommodation? If so, where?—No.

Source of Water Supply.—Preston Corporation, Fulwood Urban District Council, Wells, and Springs. What is its condition?—Preston Corporation and Fulwood excellent; Wells and Springs doubtful. Possibilities of Contamination? Wells and Springs, drainage from farm buildings. Is it subject to your Inspection?—Yes.

Is Scavenging and Removal of House Refuse carried out satisfactorily?—Yes.

How performed (by Sanitary Authority, Contract, or Occupiers of Houses)? Various areas are scavenged by five Parochial Committees.

How is the Refuse disposed of?—Tips.

Has a Destructor been provided?—No

Sewage Disposal Works. Method of Treatment?—Precipitation and Filtration.

What is the character of the Drainage System?—Some areas are sewered.

Drain Testing, Flushing, &c.?—When necessary.

Action taken with regard to Pollution of Streams?—None.

Canal Boats: Number Inspected?—16 boats. Number of Infringements of Acts?—None.

What is the condition of the Bakehouses?—Good.

What is the condition of the Slaughter Houses?—Good. Has a Public Abattoir been provided?—No.

What is the condition of the Lodging Houses?—None.

What is the Sanitary condition of the Schools?—Satisfactory.

Dairies, Cowsheds and Milkshops—

Are they periodically inspected?—Yes.

What is their condition?—Some good.

Have Regulations been made under the Order of L.G.B.?—Yes.

Are they enforced?—Yes.

Amount of air space in cubic feet required for each cow?—800. Our Authority accept 600.

Number of Cowkeepers?—381. Number on Register?—381.

Number of Dairymen or Purveyors of Milk (other than Cowkeepers)?—None. Number on Register?—None.

Action taken (if any) as to tuberculous milk?—None.

Total amount of Food seized as unfit for Human Consumption?—None.

Number of Carcases and parts of Carcases condemned for Tuberculosis?—11.

Number of Legal Proceedings, and result?—None.

Department of Inspector of Nuisances—

Number of Notices served?—128.

Nuisances remedied?—128.

Number of Legal Proceedings taken and result?—None.

Closet accommodation of the District—

Number of Privy Middens?—1,825.

Pail Closets?—873.

Fresh Water Closets?—333.

Waste Water Closets?—425.

Number of Privy Middens converted during 1913?—To Water Closets, none; to Pails, &c., 22.

Number of Pail Closets converted to Water Closets?—12.

Does Council contribute towards the cost of conversion of either privies or pail closets, or both. If so, how much?—No.

Smoke—Nothing done.

Has the Authority adopted—

“The Infectious Disease (Prevention) Act, 1890”?—No.

“The Public Health Acts Amendment Act, 1907”?—Yes.

“The Public Health Acts Amendment Act, 1890”?—Yes.

“The Notification of Births Act, 1907”?—No.

Has a Health Visitor been appointed?—No.

Notable Sanitary improvements during 1913:—Paving of back yards and abolishing of privy middens; extension of water mains.

Chief Sanitary requirements of District:—Flagging of back yards. Introduction of water carriage system were practicable. Abolition of privy middens.

Annual Report of the Medical Officer of Health for the year 1913, for the Rural District of Preston, on the Administration of the Factory and Workshop Act, 1901, in connection with

## Factories, Workshops, Workplaces, and Homework.

### 1.—INSPECTION.

Including Inspections made by Sanitary Inspector.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
FACTORIES ..... (Including Factory Laundries)	12	None.	None.
WORKSHOPS ..... (Including Workshop Laundries)	79	1	None.
WORKPLACES ..... (Other than Outworkers' Premises included in Part 3 of this Report)			
Total.....	91	1	..

### 2.—DEFECTS FOUND.

Particulars.	Number of Defects.			No. of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness.....	1	1	None.	None.
Want of Ventilation.....				
Want of drainage of floors.....				
Other nuisances .....				
Sanitary accomodation { insufficient .....				
{ unsuitable or defective..				
{ not separate for sexes ..				
<i>Offences under the Factory and Workshop Act:—</i>				
Illegal occupation of underground bakehouse (s. 101).....				
Breach of special sanitary requirements for bakehouses (ss. 97 to 100) ....				
Other offences ..... (Excluding offences relating to out-work which are included in Part 3 of this Report.)				
Total.....	1	1	None.	None.

NATURE OF WORK.  (1)	Lists received		
	Sending twice in the year.		
	Lists. (2)	Outworkers.	
		Contractors (3)	Workmen (4)
Wearing Apparel—			
Making, &c. ... ..	...	...	...
Cleaning and washing...	...	...	...
Household linen ... ..	...	...	...
Lace, lace curtains and nets	...	...	...
Curtains and furniture hangings	...	...	...
Furniture and upholstery ...	...	...	...
Electro-plate ... ..	...	...	...
File making ... ..	...	...	...
Brass and brass articles ...	...	...	...
Fur pulling ... ..	...	...	...
Cables and chains ... ..	...	...	...
Anchors and grapnels ... ..	...	...	...
Cart gear ... ..	...	...	...
Locks, latches and keys ...	...	...	...
Umbrellas, &c. ... ..	...	...	...
Artificial flowers ... ..	...	...	...
Nets, other than wire nets...	...	...	...
Tents ... ..	...	...	...
Sacks ... ..	...	...	...
Racquet and tennis balls ...	...	...	...
Paper, etc., boxes, paper bags	...	...	...
Brush making ... ..	...	...	...
Pea picking ... ..	...	...	...
Feather sorting ... ..	...	...	...
Carding, &c., of buttons, &c.	...	...	...
Stuffed toys ... ..	...	...	...
Basket making ... ..	...	...	...
Chocolates and sweetmeats ...	...	...	...
Cosaques, Chistmas crackers, Christmas stockings, &c...	..	..	..
Textile weaving ... ..	...	...	...
Total	...	...	...

#### 4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.		Number
Important classes of workshops, such as workshop bakehouses, may be enumerated here.	Blacksmiths and Wheelwrights .....	24
	Boot and Clog Repairers .....	8
	Boot and Shoe Repairers .....	5
	Saddlers .....	1
	Joiners .....	16
	Tailors .....	5
	Dressmakers .....	3
	Cycle Repairers .....	6
	Bakehouses .....	11
Total number of workshops on Register.....		79



FACTS, SECTION 107.					OUTWORK IN UN- WHOLESOME PREMISES. SECTION 108.			OUTWORK IN INSPECTED PREMISES, SECTIONS 109, 110.		
Time in the year.		Notices served on Occupiers as to keeping or sending Lists.	Prosecutions.		Instances.	Notices Served.	Prosecutions.	Instances.	Orders made (S. 110 )	Prosecutions (Secs. 109, 110.)
Contractors.	Workmen.		Failing to keep or permit inspection of Lists.	Failing to send Lists.						
(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

No works of this description in our District.

5.—OTHER MATTERS.	
Class.	Number.
Factories notified to H.M. Inspector of Factories:—	
Failure to affix Abstract of the Factory and Workshop Acts (s. 133, 1901).....	
Action taken in matters referred { Notified by H. M. Inspector.....	
by H.M. Inspector as remediable {	
under the Public Health Acts {	
but not under the Factory and { Reports (of action taken) sent to	
Workshop Acts (s. 5, 1901). { H.M. Inspector .....	None.
Other .....	
Underground Bakehouses (s. 101) :—	
Certificates granted during the year.....	
In use at the end of the year.....	

CHARLES J. TRIMBLE,  
Medical Officer of Health.

